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## FILING DATE SERIAL NO. **CLAIMS ONLY** APPLICANT(S) CLAIMS AFTER 18t AMENDMENT AFTER 2nd AMENDMENT AS FILED IND. DEP. DEP. IND, DEP. IND. DEP. IND. DEP. TOTAL IND. TOTAL Û O<sub>C</sub> <sup>(1)</sup> TOTAL DEP. TOTAL DEP. TOTAL

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

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